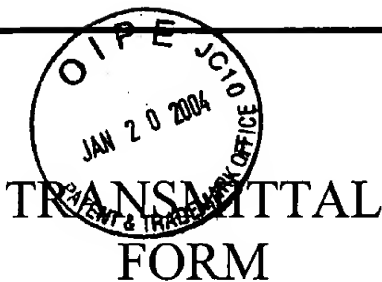


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Express Mail Mailing Label No.: EL 988704823 US



Application Serial Number	09/974,722
Filing Date	October 9, 2001
First Named Inventor	Phelps
Group Art Unit	1711
Examiner Name	Boykin, Terressa M.
Attorney Docket No.	CYC-046
Patent No.	Not applicable
Issue Date	Not applicable

RECEIVED
JAN 29 2004
TC 1700

ENCLOSURES (check all that apply)

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|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input checked="" type="checkbox"/> Check Attached
<input checked="" type="checkbox"/> Copy of Fee Transmittal Form

<input checked="" type="checkbox"/> Amendment/Response
<input type="checkbox"/> Preliminary
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets 10]

<input checked="" type="checkbox"/> Petition for Extension of Time

<input checked="" type="checkbox"/> Supplemental Information Disclosure Statement
<input checked="" type="checkbox"/> Form PTO-1449
<input checked="" type="checkbox"/> Copies of IDS Citations (A88-A101, B38-B60, and C23-C29)

<input type="checkbox"/> Certified Copy of Priority Document(s)

<input type="checkbox"/> Sequence Listing submission
<input type="checkbox"/> Paper Copy/CD
<input type="checkbox"/> Computer Readable Copy
<input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application

<input type="checkbox"/> Formal Drawing(s)

<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal

<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)

<input type="checkbox"/> Terminal Disclaimer

<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application

<input type="checkbox"/> Small Entity Statement

<input type="checkbox"/> CD(s) for large table or computer program

<input type="checkbox"/> Amendment After Allowance

<input type="checkbox"/> Request for Certificate of Correction
<input type="checkbox"/> Certificate of Correction (in duplicate) | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences

<input type="checkbox"/> Appeal Brief (in triplicate)

<input type="checkbox"/> Status Inquiry

<input checked="" type="checkbox"/> Return Receipt Postcard

<input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8

<input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8

<input checked="" type="checkbox"/> Additional Enclosures (please identify below)
<ul style="list-style-type: none"> • Associate Power of Attorney (1 pg.) |
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CORRESPONDENCE ADDRESS

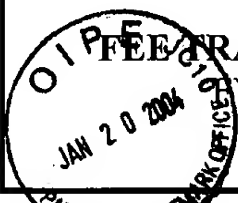
Direct all correspondence to: Patent Administrator
 Testa, Hurwitz & Thibault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110
 Tel. No.: (617) 248-7000
 Fax No.: (617) 248-7100

SIGNATURE BLOCK

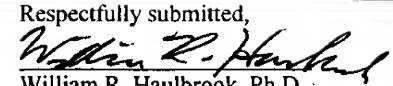
Respectfully submitted,

 William R. Haulbrook, Ph.D.
 Attorney for Applicants
 Testa, Hurwitz & Thibault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110

 Date: January 20, 2004
 Reg. No.: 53,002
 Tel. No.: (617) 310-8427
 Fax No.: (617) 248-7100

	Complete if Known	
	Application Serial Number	09/974,722
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METHOD OF PAYMENT				FEE CALCULATION (continued)																																																																																							
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other				3. ADDITIONAL FEES																																																																																							
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Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100				Respectfully submitted,  Date: January 20, 2004 Reg. No.: 53,002 Tel. No.: (617) 310-8427 Fax No.: (617) 248-7100 Attorney for the Applicants Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110																																																																																							